Name In Full

Certificate of Death

George Columbus Bailey

Died at Whitewich (Town) St. Mary's (County) MARYLAND

Date 189 9 Month Oct. Day 29 | Age Y. 45 M. 1 D. 19 | Native of Md | Occupation Captain

Male | ~~Female~~ | White | ~~Colored~~ | Married | ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~ | Number of children living 9

Husband of ~~Wife~~ Lucy Long

Father's Name Columbus C. Bailey | Mother's Name Anna Matthews

Cause of Death: Primary — Typhoid Pneumonia | How long sick 33 days

Immediate — Bright's

Accident, ~~Suicide~~, ~~Homicide~~

Reported by Robt. J. Palmer M. D.

Address Palmers Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Laura Sempronia Bryan Bryan

Certificate of Death

Died at Town near Leonardtown County St. Mary's Co MARYLAND

Date 189 9 Month October Day 27th | Age Y. 5 M. 8 D. 19. | Native of St Mary's Co | Occupation

~~Male~~ Female X | ~~White~~ Colored | ~~Married~~ Single | Widow Widower | Divorced | Number of children living

Husband of
Wife

Father's Name Wm H Bryan

Mother's Name Ann Elizan Bryan

Cause of Death: Primary 140 | How long sick 18 hours

Immediate Worms | Accident, Suicide, Homicide

Reported by Alfred Dilon - Undertaker

Address Leonardtown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 7988B

Attended by Dr. Wm H Stone

of St Mary's Co. Md.

Seen by Coroner .....

of .....

Information contained in this certificate received

from Wm. H. Bryan

of St. Mary's Co. Md.

Name in Full: Mary Estelle Butler

Certificate of Death

Died at Town: Hillsboro County: St Marys Co MARYLAND

Date 1899 Month: Oct Day: 27 | Age Y. 1 M. 1 D. | Native of: Md | Occupation:

~~Male~~ Female | White Colored | ~~Married~~ ~~Single~~ | Widow Widower | ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name: Arthur Nolan

Mother's Name: Lucy Butler

Cause of Death: Primary: Consumption 22a

How long sick: 1 mo

Immediate:

Accident, Suicide, Homicide

Reported by: J. O'Leary M.D.

Address: Hillsboro Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full — Certificate of Death

Philip Henry Dorsey

Died at Town: Clements — County: St. Mary's — MARYLAND

Date 189[illegible] Month: Oct. Day: 21st. | Age Y. 72 M. 10 D. 10 | Native of St. Mary's, Md. | Occupation Farmer

Male / ~~Female~~ — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ Widower — ~~Divorced~~

Number of children living 5

Husband / Wife of Anne Bryant

Father's Name: Walter Dorsey — Mother's Name: Ann Dorsey

Cause of Death — Primary: Chronic Bronchitis 7D — How long sick: 3 weeks

Immediate: Exhaustion & Heart — ~~Accident, Suicide, Homicide~~

Reported by Walter F. Dent M. D.

Address Oakley, St. Mary's Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 65968

Name in Full

Certificate of Death

Robert Barton Drury

Town

County

Died at Howards Race St. Mary's MARYLAND

	Month	Day		Y.	M.	D.	Native of	Occupation
Date 1899	Oct.	4	Age	75			Maryland	Farmer

Male ~~Female~~ White ~~Colored~~ ~~Married~~ ~~Single~~ ~~Widow~~ Widower Divorced

Number of children living one

Husband of ~~Wife~~ Dont Know Mary Ford

Father's Name	Dont Know	Mother's Name	Dont Know

Cause of Death — Primary: old age 98 — How long sick: Six months

Immediate: diarrhoea — ~~Accident, Suicide, Homicide~~

Reported by Zach. R. Morgan

Address Mechanicsville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Anna Gray

Town

Oakville

County

St. Mary's

MARYLAND

Died at

Month Day

Date 1894 Oct. 9

Y. M. D.

Age 17

Native of Maryland

Occupation housekeeping

~~Male~~ Female

~~White~~ Colored

~~Married~~ Single

~~Widow~~ ~~Widower~~

~~Divorced~~

~~Number of children living~~

Husband of Wife

Father's Name William Gray

Mother's Name Mary Jones

Cause of Death

Primary Phthisis Pulmonalis

How long sick 8 months

Immediate Exhaustion 22d

~~Accident, Suicide, Homicide~~

Reported by Jacob R. Morgan

Address Buchanansville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU FORM

Name In Full

Certificate of Death

Mary Elizabeth Tyson

Died at Town: Mechanicsville County: St Marys MARYLAND

Date 189 9 Month 10–12 Day | Age Y. 78 M. 5 D. 14 | Native of Md | Occupation Housekeeper

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~of~~ ~~Wife~~

Father's Name: Wm B. Tyson Mother's Name: Elizabeth Monroe

Cause of Death — Primary: — How long sick: 3 weeks

Immediate: Pneumonia 72 — Accident, Suicide, Homicide:

Reported by Sylvester Adams

Address Mechanicsville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78888

Attended by Dr. No Dr. in Attendance

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from Thomas Lyons

of Mechanicsville Md

Name in Full

Certificate of Death

L. A. Peace

Town: Charlotte Hall

County: St. Mary's

Died at Charlotte Hall St. Mary's MARYLAND

Date 189 9 Month: Oct. Day: 8

Age Y. 28 M. D.

Native of Maryland

Occupation Teacher

~~Male~~ Female

~~White~~ Colored

~~Married~~ Single

~~Widow~~ Widower

~~Divorced~~

Number of children living

Husband of

Wife

Father's Name Don't Know

Mother's Name Lucie Peale (Now Curtis)

Cause of Death: Primary Phthisis Pulmonalis

Immediate Exhaustion 12a

How long sick 4 years

~~Accident Suicide Homicide~~

Reported by Zach. R. Morgan

Address Mechanicsville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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